

Minutes of the Health and Human Services Board and Committee

Thursday, March 16, 2006

Jeskewitz (filling in for Chair Stamsta) and Chair Farrell called the meeting to order at 1:02 p.m.

Committee Members Present: Supervisors James Jeskewitz, Andy Kallin, Bill Kramer, Barbara Roncke. **Absent:** Duane Stamsta, Sandy Wolff, Rob Hutton

Board Members Present: Citizen Members Dennis Farrell (Chair), JoAnn Weidmann, Dick Wutt, Abril Medina and Supervisors Duane Paulson, Barbara Roncke. **Absent:** Duane Stamsta, Vera Stroud, Michael O'Brien.

Also Present: Chief of Staff Lee Esler, Health and Human Services Director Peter Schuler, Deputy Director Don Maurer, Senior Financial Analyst Clara Daniels, Administrative Services Division Manager Russ Kutz, Public Health Manager Dr. Nancy Healy Haney, Clinical Services Division Manager Mike DeMares, Long Term Care Division Manager Jack Bodien, Adolescent and Family Services Division Manager Pat Voss, Juvenile Services Unit II Supervisor Pete Slesar, Social Worker Jan Sanchez with guests Alonso Corral and Saul Corral, Public Health Supervisor Rosie Schroeder, Public Health Supervisor Mary Anderson, Public Health Supervisor Irene Ridgeman, Epidemiologist Darren Rausch, Public Health Advisory Committee Chair Sue Konkel, Public Health Advisory Committee members Dr. Robert Feulner and Dr. Marshall Jennison, Developmental Disabilities Advisory Committee Chair Kathleen Adams, ARCh representative Becky Hipp, United Cerebral Palsy representative Nichole Hunkins, Children's Hospital of Wisconsin representative Julie Turkoske, and Developmental Disabilities Advisory Committee members Judy and Tom Larsen, and DDAC video producer Frank Walsh.

COMMITTEE AGENDA ITEMS

Legislative Update

Jeskewitz passed out a copy of a letter to Jim Dwyer regarding a new planning requirement for federal transit program funding eligibility. This will be coming up at a future agenda of the Public Works Committee. This does not include Metra.

BOARD AGENDA ITEMS

Correspondence

All members received a copy of a map showing the counties, consortiums and planning groups that have received long term care planning grants. Waukesha County is in two planning groups. The State has now assigned a representative to each of those planning groups to work with them and will continue to go forward. Some counties who are operating Family Care are being asked to move quickly and be ready by the 1st quarter of next year. As the plans are designed, we will eventually decide which group to suggest aligning with for implementation RFP response, depending on the benefits to consumers.

Weidmann stated she received an e-mail regarding 211 being looked at as a communication vehicle in the event of a disaster. Obviously they are receiving more preparedness money in order to accomplish this.

Announcements

Farrell introduced new member of the Health and Human Services Board, Abril Medina from LaCasa de Esperanza, and all members introduced themselves as well as guests.

Future Agenda Items

Farrell stated that at a recent Long Term Care Planning Committee meeting Sharon Gold Johnson gave a presentation on Medicare Part D. We might want her to have her speak at a future board meeting.

The Joint Board and Committee will be reviewing Essential Service #1 worksheets they turned in regarding the Public Health Governance Standards.

Weidmann asked that Environmental Health give an update at an upcoming board meeting and what kind of emergency planning they have done.

JOINT BOARD/COMMITTEE AGENDA ITEM

Recognition Award

Social Worker Jan Sanchez supervises young men and women who are involved in the correctional system who are court ordered to Lincoln Hills, Ethan Allen, etc. She oversees treatment, interfaces with the office of juvenile offender review, families, clients themselves and institution staff while they are there and when they are released. Sanchez worked with a young man in the Ethan Allen School for Boys who was very withdrawn and didn't trust anyone. She met with him once or twice a month to establish a rapport with Alonso, which was very difficult in the beginning, and eventually he really opened up and helped other kids. Jan was involved in a training process with Juvenile Corrective Intervention Programming and it's a correctional-based program in the state system for juveniles. She has since developed this program in Waukesha County and she and Alonso went through the first program together. The program initially had 11 young people and she asked Alonso to help out and he did. He keeps the group going with role-playing, studies, and an all around mentor. The program runs weekly for two hours a night for approximately 4 months. This is not a short-term commitment and there was no requirement for Alonso to do this, he volunteered on his own and a number of other young people want to follow in his footsteps. Because of his participation and his input, he is being recognized for the work he has done. The Board and Committee presented Alonso with a plaque recognizing his efforts.

Maurer stated that the importance here is that a number of us have heard a lot about juvenile justice and getting these kids back into society. A handout was given to all present entitled, "Rethinking the Juvenile in Juvenile Justice", a new report by the Wisconsin Council on Children and Families. In the Executive Summary, it states "research in the field of adolescent brain development has confirmed that adolescents are more likely to engage in risk-taking behavior and less able to consider long-term consequences of risky behavior than adults". The

report recommends that adolescents who commit crimes do not present as high a threat to repeating as adults, and are favorably impacted by treatment. It consequently recommends that all youth under 18 should be under the original jurisdiction of the juvenile court, although Wisconsin moved in the opposite direction several years ago by placing 17 year olds in the less treatment oriented adult system.

COMMITTEE AGENDA ITEM

Ordinance 160-O-137 – Appropriate Additional State Revenues Passed Through Milwaukee County for Mental Health Crisis Service Expenditure Authority in the Waukesha County Department of Health and Human Services 2006 Budget

DeMares stated that about a year and a half ago he came before the board and committee to indicate that he was in the process of going for a grant from the State of Wisconsin with Milwaukee County to expand crisis services in both Milwaukee and Waukesha County. We were awarded a five-year grant of approximately \$100,000 per year which was to pass through Milwaukee County to us. Because of State complications the actual start of the grant was $\frac{3}{4}$ of a year late. We have now actually received a MOU with Milwaukee County for our pass through funds of \$58,200. These are to be expended here in Waukesha County to enhance our crisis services. We intend to train an additional group of workers in the child welfare area to do crisis planning and secure crisis spots on their caseloads primarily in foster care. We are also expanding the after hours crisis intervention programming that is provided through the Mental Health Association by adding one worker at night for approximately 6 hours per night and a few hours on weekends. We are also going to train some of our consumers in peer support which is the latest trend in mental health. We will partner with consumers and empower and train them to work side by side with other mental health counselors in a variety of situations. We have contracted with Grass Roots Empowerment which is a social services organization primarily providing advocacy and support to mental health population and they will provide an 80 hour program for 20 of our consumers so that they can become more educated and ready to be peer support to their fellow consumers. After that is complete the Mental Health Association will then begin to start a peer support warm line in conjunction with First Call for Help or 211. This is an opportunity for mental health consumers to call other trained ex-consumers to talk about their situation. Trained professionals will supervise the peer support consumers. We have seen this done with Alcoholic Anonymous over the years and how consumers work with other consumers. We are also going to plan on training four foster homes to provide crisis respite and we will be paying those foster homes to attend training. The \$58,200 has been approved by Milwaukee County and the State of Wisconsin and we anticipate that after July we will be receiving additional money from the State to Milwaukee again. We anticipate receiving another \$25,000 in each $\frac{1}{2}$ year. We put together an ordinance to accept these dollars through Milwaukee County and give us authorization to spend on the services above.

MOTION: Kallin made a motion, seconded by Kramer to allow the Department of Health and Human Services to accept the pass through grant funding and expenditure authority for costs as related above. Motion carried 5-0.

When asked how much training these peer support consumers get, DeMares stated they get 80 hours of training to start and then go into a practicum where they work for about three months at

the Mental Health Association at the pay of \$7.00/hour. We already have consumers who do this at Clubhouse and some at the Drop-in Centers and they are paid by St. Aemilians. We already have 4 people who have gone through this training from Milwaukee County.

Paulson stated that NAMI already has a peer-to-peer group – but this is not the same because we employ individuals in a work setting to work with others who are consumers.

JOINT BOARD/COMMITTEE ITEMS

Developmental Disabilities Advisory Committee Needs List Presentation

Kathleen Adams, Chair of the Developmental Disabilities Advisory Committee for the last four years and a parent of an adult child with a developmental disability who receives 10 hours of support a week. The Advisory Committee will present a long awaited video which puts together a virtual tour of Waukesha County's citizens with developmental disabilities. Adams introduced Judy Larsen who helped put this together and Larsen introduced those members that provided her with assistance. Larsen stated they received funding from the DAWN grass roots grant from the Wisconsin Council on Developmental Disabilities. She also introduced Frank Walsh who produced the video. The mission of this video is not just for today, but also to promote and support those services that are currently meeting the needs of individuals with developmentally disabilities in Waukesha County but also other possible funding sources regarding the unmet of the disabled. The video was approximately 17 minutes long and entitled "People Can't Wait". Since 1997 there was an increase from 304 to 864 children in the Birth to Three Program. This program is federally mandated and underfunded. The video showed a number of consumers and the activities they participate in. Without adequate funding the lack of available classes leaves these adults without opportunity and the ability to grow. Transportation causes other problems as it limits when and how often people can attend social events. Thursday night socials and Camp Pow Wow were part of the video and the importance of these programs for people with disabilities to live as normal a life as possible. Many have learned skills that enable them to be employed and other participate in training programs. This gives a person a reason to get and give value and meaning to their lives. Others participate in day programs. In 1972 Waukesha County placed 8 men in the first group home. Today there are 115 citizens served in group homes and 160 in adult supportive living apartments or in their family homes. Currently there are 80 people waiting for residential services, 50 for supported home care, and 6 are waiting for the training and skills of daily living. Most children and adults with disabilities live with families and the entire families are stressed and need the respite services as a break for themselves, which also keeps the family intact.

Adams handed out the 2007 Waukesha County Developmental Disabilities Advisory Committee (DDAC) Unmet Needs/Recommendations. Copies of the video were given to all board and committee members present. Adams went over this document. During the last decade there has been a shift from the institutions to keeping people with disabilities in the community. All people should have choices when seeking to meet their daily needs. The needs of the committee are as followed: 1) Increase funding for respite for families with children or adults with disabilities, 2) increase funding for day programming for people with disabilities coming out of high school, 3) decrease the waiting list for services and 4) create a representative task force of

people with disabilities, family members, agency representatives, Health and Human Services staff and elected officials to study the crisis of increasing need for services in the county.

It is the responsibility of the DDAC to provide realistic recommendations for funding critical unmet needs. Year after year they present some of these same needs however this year they decided to address the needs of the 60 families waiting for respite services through United Cerebral Palsy. The service provides 120 hours of respite per family per year – 10 hours per month at the cost of approximately \$1,000 per year. Respite will decrease the need for costly intervention services. Nichole Hunkins from UCP stated that they are currently serving 307 families with 60 on the waiting list. Day programming opportunities such as Adaptive Community Approach Program, Goodwill programs, ARCh program, Ranch day programs are desperately needed for those transitioning from high school where their day is very structured to sitting in their homes with almost nothing while families attempt to change their daily lives to be there to take care of their disabled family member. The Task Force is something that is undefined right now – is in the brainstorming mode right now. Weidmann stated that they might want to consider who is on their task force, i.e. businesses, service clubs, etc. Farrell stated that there was a task force in 1992 and the good thing that came out of it was the relationship with the housing authority to find housing for the disabled. Esler stated that there are 307 families and to add 60 families at \$1,000 a month is about \$8 per hour. He stated that it would be beneficial to spend this \$60,000 per year rather than placing them in out of home care. However, Farrell stated that at times aging parents just are not capable of handling these individuals. The goal is to keep people in the least restrictive environment, but there are times when an individual just can't remain at home, but do much better in a group home rather than institutionalized.

Public Health Advisory Committee Needs List Presentation

Dr. Healy Haney introduced the Public Health Advisory Committee Chair, Sue Konkel as well as members of the advisory committee, Dr. Robert Feulner and Dr. Marshall Jennison. Healy Haney started the presentation with a powerpoint presentation on Public Health Preparedness. After 911 and the Anthrax incidents, the federal government placed additional responsibility on local health departments. However we are moving further from a bioterrorism focus to an all health hazard approach encompassing communicable disease epidemics and environmental hazards due to natural or intentional disasters. The Department of Health and Human Services oversees the Centers for Disease Control and Prevention and those kinds of directives go to the State Health Department and they in turn in conjunction with local public health implement whatever plans are being drafted at the State level. In this area we also have the Milwaukee/Waukesha Consortium for public health preparedness. The Surveillance/Epidemiology is getting much more complicated and expansive and we are participating in the development of the Wisconsin electronic data collection system as well participating in the Regional BIOWatch Plan. We are responsible for obtaining and transporting biologic and chemical agents. We are also development the Waukesha Civil Detention Ordinance outlining local detention templates for isolation and quarantine. The HAN (Health Alert Network) and Physician Health Alert Network is a means to transmit clinical emergency information to local physicians. They are also developing risk communication plan to alert citizens of disease risks. Education and training is needed to maintain workforce competence in Incident Command Training and National Incident Management System. We are also developing a plan to receive, manage and distribute the pharmaceutical stockpile and strategic

national stockpile (SNS) to the hospital staff and general population. On April 7th the SNS is being flown in for a public health exercise for the public health professionals in this region and will be hosted by Waukesha County at the Expo Center.

We have been receiving funding from the CDC for the past four years. In 2006 we will be receiving \$123,822 for all-hazards public health emergency. We are the first in the state to have commitments from our major health care providers which would be Aurora, Pro-Health, Covenant and Medical Associates to work with us and distributing medication to their chronically ill who are already in caseloads. There is a tremendous amount of logistics to be worked out with these providers but it is a first.

We are part of the Milwaukee/Waukesha Public Health Preparedness Consortium and Healy Haney went over the list of activities we are responsible for within this consortium. We now have new partners in it, the hospitals and businesses. Businesses can be economically impacted if there is a pandemic, so they realize they have a stake in this. GE is a partner and have approached us for information for plans. The last slide was a model for the Regional Unified Influenza Pandemic Implementation Plan.

Dr. Feulner then took over and presented the Public Health Needs. He noted that in December of 2004, Governor Doyle issued an Executive Order designating the National Incident Management System (NIMS) as the basis for local Incident Management for responding to crisis in the State of Wisconsin. As a result, the Public Health Division needs to upgrade infrastructure ability to meet the NIMS standards. The following is a list of the needs 1) hire a full-time Public Health Preparedness Coordinator to assist the Health Officer in coordinating the Public Health Preparedness activities as noted in Dr. Healy Haney's presentation. The cost for this position would be \$59,543 and would come out of grant funds – no tax levy. Other counties in the State already have such a position. Maurer noted that due to increased responsibilities, this important role is not one that can be assumed by existing staff, we need one person to hold it all together. There was a previous attempt to utilize a part-time contract person to fulfill this role but it was not successful. The second need is to integrate the Public Health Division in Waukesha County Emergency Government as first responders in local natural and/or biological disaster – no cost. Dr. Feulner gave the example of the Anthrax problem and how people became ill but they didn't know in the beginning that this was an emergency government issue because it involved many different levels of people being exposed. The number 3 need is to upgrade the infrastructure resources needed to coordinate Public Health Division emergency response, i.e. Blackberries that don't work because we can't communicate through our system. The cost is \$20,000 and will be paid for with the preparedness grant. The fourth and final need is to provide one Public Health Division computer with access to the WEB without the WEBSense filter – no cost.

Paulson expressed frustration that this was brought up some time ago (about 9 months ago) and that a number of members didn't know that this wasn't taken care of. He requested that IT attend a future meeting to address this.

Kallin noted that after the \$79,543 was taken out of the \$123,000 of grant money, what would be done with the remainder. Healy Haney stated that they have approximately \$88,000 left that would be available. We have expended two \$10,000 contracts – an infection control physician

and also the pharmacist who agree to assist us with the draft of the plan to distribute medication. Healy Haney stated we have \$44,000 coming in April for the pandemic plan in addition to the \$123,000 and we had a \$28,000 carryover from last year to develop a physician alert network which we are working on this year.

Paulson stated the position of Public Health Preparedness Coordinator could either be added as a stand alone or part of the annual budget. The grant money is already in the 2006 budget. Paulson said to get the ordinance together since the money is already there, and the workload is now.

MOTION: Kramer made a motion seconded by Kallin to direct Health and Human Services staff to put together the ordinance to add the full time position of Preparedness Coordinator in 2006 to the Health and Human Services Department. Motion carried 5-0.

MOTION: Roncke made a motion seconded by Weidmann to accept the report of the Public Health Division. Motion carried 6-0.

Jeskewitz repeated that the committee would like to have someone from the IT Department come to the next meeting and explain why the filter has not yet been removed from a computer in the Public Health Division.

Adjournment

MOTION: Kramer made a motion, seconded by Kallin to adjourn the Committee meeting. Motion carried 5-0.

MOTION: Wutt made a motion, seconded by Medina to adjourn the Board meeting. Motion carried 6-0.

The meeting adjourned at 3:25 p.m.

Minutes recorded by Kathy Leach.

Sincerely,

Andrew J. Kallin
Secretary for the Committee